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| PET | ITION | FOR E | XTENSION OF TIME UNDER | Docket Number (Optional) PHO-122 | | | | |
|--|--|---------|----------------------------|-------------------------------------|-----------------------|------------------------|---|--|
| FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | | | | | | |
| Application Number 09/900,355 | | | | | Filed July 6, 2001 | | | |
| For Medicaments For Chemotherapeutic Treatment of Disease | | | | | | | | |
| Art Unit 1635 | | | | | Examiner J. Epps Ford | | | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application | | | | | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | | | | |
| | <u>Fee</u> <u>Sm</u> | | | | nall Entity Fee | | | |
| | \boxtimes | One mo | onth (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ | 120.00 | |
| | | Two mo | onths (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | | |
| | | Three r | nonths (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ | | |
| | | Four m | onths (37 CFR 1 17(a)(4)) | \$1590 | \$795 | \$ | | |
| | | Five mo | onths (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ | MANAGEMENT TO THE PARTY OF THE | |
| | Applicant claims small entity status. See 37 CFR 1.27. | | | | | | | |
| | A check in the amount of the fee is enclosed. | | | | | | | |
| | Payment by credit card. Form PTO-2038 is attached. | | | | | | | |
| | The Director has already been authorized to charge fees in this application to a Deposit Account | | | | | | | |
| | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50/1039 | | | | | | | |
| ALL AND THE PROPERTY OF THE PR | WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | |
| I am the applicant/inventor. | | | | | | | | |
| □ assignee of record of the entire interest. See 37 CFR 3 71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96) □ attorney or agent of record. Registration Number 34,225 | | | | | | | | |
| | | | | | | | | |
| attorney or agent under 37 CFR 1.34 Registration number if acting under 37 CFR 1.34 February 12, 2007 | | | | | | | | |
| | | | | | | | , | |
| | Signature Mork J. Murphy | | | | | Date (312) 236-8500 | | |
| Mark J. Murphy Typed or printed name | | | | | Telephone Number | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one | | | | | | | | |
| signature is required, see below | | | | | | | | |
| Total of <u>1</u> forms are submitted. | | | | | | | | |

This collection of information is required by 37 CFR 1 136(a) The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce. P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.